PATENT APPLICATION FEE DETERMINATION RECO Effective January 1, 2003							ORD		1	(_	SCRET NO	20)
CLAIMS AS FILED - PART I								LLE	ENTITY		OTHE	R THAN
	OTAL CLAIM	IS	· (Colur	nn 1)	_(Co	lumn 2)	TYP	E [OR	SMALL	ENTITY
F	FOR			NUMBER FILED		NUMBER EXTRA		ATE	FEE 375.00		RATE BASIC FEI	FEE
	OTAL CHARG	EABLE CLAIMS	50	5 (minus 20= 1		. 30		9=		75	-	750.00
ĺδ	DEPENDENT	CLAIMS	9	9 minus 3 =		6		2=	 -	OR		090,0
M	ULTIPLE DEP	ENDENT CLAIM	PRESENT	RESENT						OR		750.
* If the difference in column 1 is less than zero, enter "0" in column 2						<u> </u>	40= TAL	ļ	OR		10	
CLAIMS AS AMENDED - PART II							10	TAL	<u> </u>	JOR	_	paid
_	(Column 1) (Column 2) (Column 3)						SM	ALL	ENTITY	OR		R THAN ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMB PREVIO	ER USLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total Independent	* (Minus	* 51	0	= /	X\$	9=		OR	X\$18=	
AM		ENTATION OF M	Minus ULTIPLE DE	PENDENT	CI AIM	= /	X4:	2=	/	OR	X84=	1
								0=	- (OR	+280= /	
							ADDIT.	TAL FEE		OR	TOTAL ADDIT. FEE	
_	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST (_		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBE PREVIOL PAID FO	ER JSLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	44		=	X\$ 9	=		OR	X\$18=	
	Independent FIRST PRESE	* NTATION OF MI	Minus	***	MIA P	=	X42	=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140	=		OR	+280=	
							TO ADDIT, F	AL EE			TOTAL DDIT. FEE	
1		(Column 1) CLAIMS		(Column		(Column 3)				•	DDII. FEE	
ᇎᅡ		REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	_		OR	X\$18=	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
AM	Independent * Minus FIRST PRESENTATION OF MULTIPLE DI			PENDENT CI AIN		-	X42=	+		OR	X84=	
								1		OR	+280=	
!!	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." A									OR A	TOTAL DDIT. FEE	
Π	e "Highest Numi	ber Previously Paid	For" (Total or	Independent)	is the h	nighest number fo	ound in the	appro	priate box	in colur	ma 1.	

FORM PTO-875 (Rev. 12/02)

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